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Fill in this information to identify your case:		
United States Bankruptcy Court for the:  Northern District of: Illinois (State)		
Case number (if known)	Chapter you are filing under:	
	Chapter 7 Chapter 11 Chapter 12 Chapter 13	Check if this is an amended filing

#### Official Form 101

#### Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name	Chaina	
Write the name that is on	First name	First name
your government-issued picture identification (for	Middle name	Middle name
example, your driver's license or passport	Trotter Last name	Last name
Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you		
have used in the last 8 years	First name	First name
Include your married or	Middle name	Middle name
maiden names.	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
3. Only the last 4 digits of your	XXX - XX- <u>5605</u>	xxx - xx-
Social Security number or federal	OR	OR
Individual Taxpayer Identification number (ITIN)	9 xx - xx-	9 xx - xx-

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D	First Name	Middle Name	Last Name	Case number (# known)	
		About Debtor 1:		About Debtor 2 (S	Spouse Only in a Joint Case):
4.	Any business names and Employer	I have not used any busine	ss names or EINs.	I have not used an	y business names or EINs.
	Identification Numbers (EIN) you have used in the	Business name		Business name	
	last 8 years	Business name	_	Business name	
	Include trade names and doing business as names	EIN		EIN	
		EIN		EIN	
5.	Where you live			If Debtor 2 lives at a	different address:
		A247 Lindenwood Dr Apt 3e  Number Street		Number Stree	et
		Matteson Illinois	60443		
		City State Cook	Zip Code	City St	tate Zip Code
		County		County	
		If your mailing address is diff fill it in here. Note that the cour this mailing address.			ddress is different from yours, fill it ourt will send any notices to this mailing
		Number Street		Number Stree	et
		City State	Zip Code	City	State Zip Code
6.	Why you are	Check one:		Check one:	<u> </u>
	choosing this district to file for		ore filing this petition, I have	Over the last 180 c	days before filing this petition, I have t longer than in any other district.
	bankruptcy		olain. (See 28 U.S.C. §§ 1408.)	_	son. Explain. (See 28 U.S.C. §§ 1408.)

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Debtor 1 Chaina		A Colollo A loca			Case number (if know	vn)
First Name  Part 2: Tell the	Court Abo	Middle Nam		Last Name		
7. The chapter Bankruptcy you are cho file under	of the Code	Check one. (For a	brief description of	each, see <i>Notice Required</i> and check the appropriate bo		(b) for Individuals Filing for Bankruptcy (Form
8. How you wi the fee	II pay	court for mo may pay with on your beh  I need to pay Individuals to By law, a judges than 15 the fee in in	ore details about the cash, cashie alf, your attorn ay the fee in it to Pay Your Filinat my fee be added may, but its 50% of the officients). If	ut how you may pay. Ther's check, or money of the may pay with a creation of the may pay. If you chang fee in Installments (  waived (You may requise not required to, waived) waived that appropriate that appropriate the may require the ma	ypically, if you rder If your a dit card or checoose this option (Official Form 1) est this option e your fee, and oplies to your fan, you must fill	only if you are filing for Chapter 7. may do so only if your income is amily size and you are unable to pay out the <i>Application to Have the</i>
9. Have you fil bankruptcy the last 8 ye	within	✓ No.  ✓ Yes. District  District  District		When When When	MM/DD/YYYY  MM/DD/YYYY	Case number  Case number  Case number
10. Are any ban cases pendi being filed I spouse who filing this cayou, or by a business paby an affiliat	ng or oy a is not ase with artner, or	✓ No.  Yes. Debtor District Debtor District		When	MM / DD / YYYY	Relationship to you  Case number, if known  Relationship to you  Case number, if known
11. Do you rent residence?	your	✓ No.	r landlord obtained . Go to line 12.	an eviction judgment against atement About an Eviction Judgetition.		

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Debtor 1 Chaina				Trotter	Case number (if know	wn)	
First Name	_			Last Name			
Part 3: Report About An	y Bus	sinesse	es You Own as a S	sole Proprietor			
12. Are you a sole proprietor of any full- or part-time		No. Yes.	Go to Part 4.  Name and location of b	ousiness			
business?							
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation,			Name of business, if an Number	Street			
partnership, or LLC.			0':		<b>O</b> : :	7: 0 1	
If you have more than one sole proprietorship, use a			Check the appropriate	box to describe you		Zip Code	
separate sheet and			Health Care Bu	siness (as defined in	n 11 U.S.C. § 101(27A))		
attach it to this Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))							
petition. Stockbroker (as defined in 11 U.S.C. § 101(53A))							
Commodity Broker (as defined in 11 U.S.C. § 101(6))							
			None of the above	ve			
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?  If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statem operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the propriate business debtor?					et, statement of		
For a definition of	✓	No.	I am not filing under Ch	napter 11.			
small business debtor, see 11 U.S.C. § 101(51D).		No.	I am filing under Chapt Bankruptcy Code.	ter 11, but I am NOT	a small business debtor ac	ccording to the definition	n in the
		Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.					
Part 4: Report if You Ow	n or	Have A	Any Hazardous Pro	operty or Any P	Property That Needs	Immediate Attent	tion
14. Do you own or have any property that poses or is alleged to pose a threat of	<ul><li>✓</li><li>□</li></ul>	No. Yes.	What is the hazard?				
imminent and identifiable hazard to public health or			If immediate attention is r	needed, why is it nee	eded?		
safety? Or do you		,	Where is the property?				
own any property			, , ,	Number	Street		
that needs immediate							
attention?							
For example, do you				City	<b></b>		Zin Condo
own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?				City	State	2	ip Code

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Debtor 1 Chaina Trotter Case number (if known)

#### First Name Middle Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed about credit this bankruptcy petition, and I received a certificate of this bankruptcy petition, and I received a certificate of counseling. completion. completion. Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, The law requires that that you developed with the agency. that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed counseling before this bankruptcy petition, but I do not have a this bankruptcy petition, but I do not have a you file for certificate of completion. certificate of completion. bankruptcy. You must truthfully check Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment one of the following plan, if any. plan, if any. choices. If you cannot do so, you are I certify that I asked for credit counseling services I certify that I asked for credit counseling services not eligible to file. from an approved agency, but was unable to obtain from an approved agency, but was unable to obtain those services during the 7 days after I made my those services during the 7 days after I made my If you file anyway, request, and exigent circumstances merit a 30-day request, and exigent circumstances merit a 30-day temporary waiver of the requirement. temporary waiver of the requirement. the court can dismiss your case, you will To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, lose whatever filing attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to fee you paid, and obtain the briefing, why you were unable to obtain it before obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances you filed for bankruptcy, and what exigent circumstances your creditors can required you to file this case. required you to file this case. begin collection activities again. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for bankruptcy. bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, the payment plan you developed, if any. If you do not do so, your case may be dismissed. your case may be dismissed. Any extension of the 30-day deadline is granted only for Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me incapable of deficiency that makes me incapable of realizing or making rational decisions realizing or making rational decisions about finances. Disability. My physical disability causes me to be Disability. My physical disability causes me to be unable to participate in a briefing in unable to participate in a briefing in person, by phone, or through the person, by phone, or through the internet, even after I reasonably tried internet, even after I reasonably tried to do so. to do so. Active duty. Active duty. I am currently on active military duty in I am currently on active military duty in a military combat zone. a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of about credit counseling, you must file a motion for waiver of

credit counseling with the court.

credit counseling with the court.

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Debtor 1 Chaina		rotter Case number (if k	nown)			
First Name	Middle Name La	ast Name				
16. What kind of debts do you have?	<ul> <li>16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."  No. Go to line 16b.  Yes. Go to line 17.</li> <li>16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.  No. Go to line 16c.  Yes. Go to line 17.</li> <li>16c. State the type of debts you owe that are not consumer debts or business debts.</li> </ul>					
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?  No.  Yes.					
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000			
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion			
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion			
Part 7: Sign Below						
For you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.  If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.  If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).  I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  **  /s/ Chaina Trotter Signature of Debtor 1  Executed on					

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Debtor 1	Chaina		Trotter	Case number (i	if known)
	First Name	Middle Name	Last Name		
you are by one If you a represe	ur attorney, if e represented are not ented by an ey, you do not	eligibility to proceed u the relief available un- to the debtor(s) the no	nder Chapter 7, 11, 12 der each chapter for v otice required by 11 U.	2, or 13 of title 11, Un which the person is e S.C. § 342(b) and, ir	nat I have informed the debtor(s) about nited States Code, and have explained eligible. I also certify that I have delivered in a case in which § 707(b)(4)(D) applies, ation in the schedules filed with the
	o file this page.	/s/ Mark Bernache Signature of Attorney	•	Date	10/19/2016 MM / DD / YYYY
		Mark Bernachea Printed name  Semrad Law Firm Firm name  11101 S. Western Ave Street	enue		
		<u>Chicago</u> City		Illinois State	60643 Zip Code
		Contact phone	3128374026	Email address	mbernachea@semradlaw.com
		6317545		Illino	ois
		Bar number	9		

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Fill in this information to identify your case:						
Debtor 1	Chaina	Trotter				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing) First Name		Middle Name	Last Name			
United States Bankruptcy Court for the:		Northern	District of Illinois(State)			
Case number (If known)	-		(Giaic)	<u>_</u>		

П	Check if this is ar
	amended filing

12/15

#### Official Form 106Sum

#### **Summary of Your Assets and Liabilities and Certain Statistical Information**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets	
	<b>Your assets</b> Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$7,330.00
1c. Copy line 63, Total of all property on Schedule A/B	\$7,330.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
<ol> <li>Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)</li> <li>Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D</li> </ol>	\$14,431.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$26,141.00
Your total liabilities	\$40,572.00
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I)  Copy your combined monthly income from line 12 of Schedule I	\$1,928.32
Schedule J: Your Expenses (Official Form 106J)  Copy your monthly expenses from line 22, Column A, of Schedule J	\$1,578.00

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De	ebtor 1 Chaina	Trotter	Case number (if known)							
		liddle Name Last Name								
Par	rt 4: Answer These Questions for	or Administrative and Statist	ical Records							
6. <b>/</b>	Are you filing for bankruptcy under Cha	apters 7, 11, or 13?								
	No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.									
	✓ Yes.									
7. <b>\</b>	What kind of debt do you have?									
		r debts. Consumer debts are those ind C. § 101(8). Fill out lines 8-10 for statis	curred by an individual primarily for a personal, stical purposes. 28 U.S.C. § 159.							
	Your debts are not primarily consum this form to the court with your other s		rt on this part of the form. Check this box and so	ubmit						
8.	From the Statement of Your Current In Form 122A-1 Line 11; OR, Form 122B Lin		rent monthly income from Official	\$2,153.50						
9.	Copy the following special categorie	s of claims from Part 4, line 6 of Sc	hedule E/F:							
	From Part 4 on Schedule E/F, copy th	ne following:	Total claim							
	9a. Domestic support obligations (Copy	line 6a.)	\$0.00	_						
	9b. Taxes and certain other debts you ow	ve the government. (Copy line 6b.)	\$0.00							
	9c. Claims for death or personal injury w	hile you were intoxicated. (Copy line 6	c.) \$0.00	<u> </u>						
	9d. Student loans. (Copy line 6f.) \$13,599.00									
	9e. Obligations arising out of a separation									
	priority claims. (Copy line 6g.)									
	9f. Debts to pension or profit-sharing pla	ans, and other similar debts. (Copy line	90.00 <del>\$0.00</del>	_						
	9g. <b>Total.</b> Add lines 9a through 9f.		\$13 599 00	$\neg$						

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FIII III II II II	IIIIOIIII	ation to identify your cas	е.					
Debtor 1		Chaina First Name	NA: alalla N	I	Trotter			
Dobtor 2		First Name	Middle N	vame	Last Name			
Debtor 2 (Spouse,	if filing)	First Name	Middle N	Name	Last Name			
United Sta	ates Ba	nkruptcy Court for the:	Northern		District of Illinois (State)			
Case num (If known)	nber				(State)			
Officia	al Fo	orm 106A/B						Check if this is an amended filing
Sche	dule	A/B: Prope	erty					12/1
category v responsib write your	where yole for some	ou think it fits best. B supplying correct info and case number (if k	e as complete an rmation. If more s nown). Answer ev	d acc space ery q	sset only once. If an asset fits in more t urate as possible. If two married peopl is needed, attach a separate sheet to uestion. d, or Other Real Estate You Ow	e are f this fo	iling together, both are or rm. On the top of any a	equally
			juitable interest ir	any	residence, building, land, or similar pro	perty	?	
$\checkmark$		o to Part 2						
1.1		Vhere is the property?  address, if available, or	other description	What is the property? Check all that apply.  Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home		the amount of any secure	laims or exemptions. Put ed claims on Schedule D: aims Secured by Property.  Current value of the portion you own?	
	Numb		7:n Code	Ħ	Land Investment property Timeshare Other		Describe the nature of interest (such as fee si the entireties, or a life	mple, tenancy by
	City	State	Zip Code	Who	Debtor 1 and Debtor 2 only At least one of the debtors and another	ck	Check if this is con (see instructions)	mmunity property
				Oth	er information you wish to add about t	his ite	m, such as local	
lfacou	our or	have more than one, list	horo:	pro	perty identification number:			
1.2	Street	address, if available, or			at is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land		the amount of any secure	laims or exemptions. Put ed claims on Schedule D: hims Secured by Property.  Current value of the portion you own?
	Numb	er Street State	Zip Code	Ħ	Investment property Timeshare Other		Describe the nature of interest (such as fee si the entireties, or a life	mple, tenancy by
				one.	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another er information you wish to add about to		Check if this is co (see instructions)  m, such as local	mmunity property

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Debtor 1	Chaina First Name	Middle Name	Trotter (	Case number	(if known)	_
1.3Stre	et address, if available, or oth	<b>v</b>	What is the property? Check all that apply Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home	y.	Do not deduct secured of the amount of any secure Creditors Who Have Cla Current value of the entire property?	
Nun		Zip Code C	Land Investment property Timeshare Other  Who has an interest in the property? Cl	heck one.	Describe the nature of interest (such as fee sit the entireties, or a life of the contraction)  Check if this is contractions	mple, tenancy by estate), if known.
		pı tion you own for al	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another other information you wish to add about roperty identification number: Il of your entries from Part 1, including	any entries	s for pages	
Do you ov you own th 3. Cars, va	at someone else drives. If youns, trucks, tractors, sport utili	<b>equitable interest ir</b> u lease a vehicle, also	n any vehicles, whether they are registe o report it on Schedule G: Executory Contra cles			
✓ Ye. 3.1	S	Ford Taurus 2008 169676  169,676 miles	Who has an interest in the property one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anot Check if this is community prop instructions)	her		laims or exemptions. Put ad claims on <i>Schedule D:</i> hims Secured by Property.  Current value of the portion you own?  \$5250.00
3.2	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the property one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anot Check if this is community prop instructions)	her		laims or exemptions. Put ed claims on Schedule D: nims Secured by Property.  Current value of the portion you own?

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Debtor 1		Trotter Case number	(if known)	
	First Name Middle N	Name Last Name		
3.3	Make	Who has an interest in the property? Check		d claims or exemptions. Put
	Model:	one.	•	cured claims on Schedule D:
	Year:	Debtor 1 only	Creditors Who Have	Claims Secured by Property.
	Approximate mileage:	_ Debtor 2 only	Current value of the	e Current value of the
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		At least one of the debtors and another		
		Check if this is community property (see		
		instructions)		
3.4	Make	Who has an interest in the property? Check	Do not deduct secure	d claims or exemptions. Put
	Model:	one.	the amount of any sec	cured claims on Schedule D:
	Year:	Debtor 1 only	Creditors Who Have	Claims Secured by Property.
	Approximate mileage:	_ Debtor 2 only	Current value of the	e Current value of the
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		At least one of the debtors and another	-	
		Check if this is community property (see		
		instructions)		
4.1	Make Model:	Who has an interest in the property? Check one.		d claims or exemptions. Put cured claims on <i>Schedule D</i> :
	Year:	Debtor 1 only		Claims Secured by Property.
	Approximate mileage:	Debtor 2 only		, , ,
	Oth an information.		Current value of the entire property?	e Current value of the portion you own?
	Other information:	Debtor 1 and Debtor 2 only  At least one of the debtors and another	—————	—————
		Check if this is community property (see instructions)		
4.2	Make	Who has an interest in the property? Check	Do not deduct secure	d claims or exemptions. Put
	Model:	one.		cured claims on Schedule D:
	Year:	Debtor 1 only	Creditors Who Have	Claims Secured by Property.
	Approximate mileage:	Debtor 2 only	Current value of the	e Current value of the
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		At least one of the debtors and another		
		Check if this is community property (see		
		instructions)		
5. Add	the dollar value of the portion you o	wn for all of your entries from Part 2, including any entrie	s for pages	2550 00
you ha	ive attached for Part 2. Write that num	ber here	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	\$5250.00

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D	ebtor 1	Chaina	Trotter	Case number (if known)	
		First Name	Middle Name Last Name		
Pa	art 3:	Describe \	our Personal and Household Items		
D	o you	own or h	ave any legal or equitable interest in any of the follo	owing items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
			s and furnishings diances, furniture, linens, china, kitchenware		
	No				
<b>✓</b>	Yes. D	Describe	miscellaneous household goods and furnishings		\$650.00
	7. Electi Examp		s and radios; audio, video, stereo, and digital equipment; computers, p	orinters, scanners; music	
		Describe	miscellaneous household electronics: cell phone, iPad, used televisior	n	\$250.00
Ť					\$350.00
		•	ue and figurines; paintings, prints, or other artwork; books, pictures, or oth in, or baseball card collections; other collections, memorabilia, collecti	•	
✓	No				
	Yes. D	Describe			
		les: Sports, pl	orts and hobbies notographic, exercise, and other hobby equipment; bicycles, pool tables s; carpentry tools; musical instruments	s, golf clubs, skis; canoes	
✓	No				
	Yes. D	Describe			
	No		les, shotguns, ammunition, and related equipment		]
	1. Clot	hes	clothes, furs, leather coats, designer wear, shoes, accessories		
	No				
<b>✓</b>	Yes. D	Describe	used clothing and apparel		\$450.00
	2. Jewe Examp	•	ewelry, costume jewelry, engagement rings, wedding rings, heirloom je	ewelry, watches, gems,	_
┝		Describe	miscellaneous costume jewelry		\$150.00
	Examp	-farm anima les: Dogs, ca	s, birds, horses		<u>\$150.00</u>
f		Describe			
1	4. Any	other persor	al and household items you did not already list, including any h	ealth aids you did not list	
<b>✓</b>	No				
		Describe			
			llue of all of your entries from Part 3, including any entries for pa number here	_	\$1850.00

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Do you own or have any legal or equitable interest in any of the following? portion	
Do you own or have any legal or equitable interest in any of the following?  Curren portion Do not do or exemp  16. Cash  Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition  No Yes	
Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition    Vo	rent value of the tion you own? ot deduct secured claims emptions.
17. Deposits of money  Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.  No  ✓ Yes  Institution name:  17.1. Checking account:  17.2. Checking account:  17.3. Savings account:	
17.2. Checking account:  17.3. Savings account:	
17.4. Savings account:  17.5. Certificates of deposit:  17.6. Other financial account:  NetSpend Prepaid Debit Card \$230.00  17.7. Other financial account:	0.00
17.8. Other financial account: 17.9. Other financial account:  18. Bonds, mutual funds, or publicly traded stocks	
Examples: Bond funds, investment accounts with brokerage firms, money market accounts  No Institution or issuer name:	
19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture  No  Yes. Give specific information about them  Name of entity  % of ownership:	

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Deb	tor 1	Chaina		Trotter	Case number (if known)	
		First Name	Middle Name	Last Name		
20.	Neg	otiable instruments ir	orate bonds and other negotian clude personal checks, cashiers into are those you cannot transfer to lissuer name:	checks, promissory notes, and r	money orders.	
		u 10111				
21.	Exa	irement or pension mples: Interests in IR	accounts A, ERISA, Keogh, 401(k), 403(b)	, thrift savings accounts, or othe	r pension or profit-sharing plans	
	⊻	No	Time of account	Institution name		
		Yes. List each account	Type of account: 401(k) or similar plan:	Institution name:		
		separately.	Pension plan:			
			IRA:			
			Retirement account:			
			Keogh:			
			Additional account:			
			Additional account:			
22.	You Exa		orepayments deposits you have made so that you with landlords, prepaid rent, public			
		Yes	Electric:			
			Gas:			
			Heating oil:			
			Security deposit on rental unit:	-		
			Prepaid rent:			
			Telephone:			
			Water:			
			Rented furniture:			
			Other:			
23.		nuities (A contract for	a periodic payment of money to y	ou, either for life or for a number	of years)	
		No Yes	Issuer name and description:			

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Debt	or 1 Chaina First Name		Middle Name	Trotter  Last Name	Case number (if known)	
24.	Interests in a		an account in a qu		ler a qualified state tuition program	•
	26 U.S.C. §§ €	530(b)(1), 529A(b), ar	na 529(b)( 1).			
	Yes	Institution name and	description. Separate	ely file the records of any interest	s.11 U.S.C. § 521(c):	
25.		able or future intere or your benefit	ests in property (oth	ner than anything listed in line	e 1), and rights or powers	
	✓ No	or your benefit				
	Yes. Desc	cribe				
26	Detents semi	wights trademorks	trada asserta and	other intellectual property		1
26.				other intellectual property om royalties and licensing agree	ments	
	✓ No	awih a				7
	Yes. Desc	mbe				
27.		nchises, and other o				
	Examples: Buil	iding permits, exclusiv	ve licenses, cooperat	tive association holdings, liquor	licenses, professional licenses	
	Yes. Desc	cribe				
			_			
Mor	iey or prope	erty owed to you	u?			Current value of the portion you own?  Do not deduct secured claims or examptions
	Tax refunds o		u?			portion you own?
	Tax refunds o	wed to you	u?		Falleri	portion you own? Do not deduct secured claims or exemptions.
	Tax refunds or No Yes. Give s	wed to you specific information tt hem, including whet	ther		Federal:	portion you own? Do not deduct secured claims or exemptions.  \$0.00
	Tax refunds or  No Yes. Give s abou you a	wed to you specific information	ther		State:	portion you own? Do not deduct secured claims or exemptions.  \$0.00
28.	Tax refunds or  No Yes. Give s abou you a	wed to you specific information at them, including whet already filed the return the tax years	ther			portion you own? Do not deduct secured claims or exemptions.  \$0.00
28.	Tax refunds or  No Yes. Give s abou you a and t	wed to you specific information It them, including whet already filed the return the tax years	ther as	t, child support, maintenance, div	State:	portion you own? Do not deduct secured claims or exemptions.  \$0.00
28.	Tax refunds or  No Yes. Give s about you a and t  Family support Examples: Past	wed to you specific information It them, including whet already filed the return the tax years  rt t due or lump sum alim	ther is nony, spousal support	t, child support, maintenance, div	State: Local:	portion you own? Do not deduct secured claims or exemptions.  \$0.00
28.	Tax refunds or  No Yes. Give s about you a and t  Family support Examples: Past	wed to you specific information It them, including whet already filed the return the tax years	ther is nony, spousal support	t, child support, maintenance, div	State: Local:  vorce settlement, property settlement	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00
28.	Tax refunds or  No Yes. Give s about you a and t  Family support Examples: Past	wed to you specific information It them, including whet already filed the return the tax years  rt t due or lump sum alim	ther is nony, spousal support	t, child support, maintenance, div	State: Local:  rorce settlement, property settlement  Alimony:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00
28.	Tax refunds or  No Yes. Give s about you a and t  Family support Examples: Past	wed to you specific information It them, including whet already filed the return the tax years  rt t due or lump sum alim	ther is nony, spousal support	t, child support, maintenance, div	State: Local:  rorce settlement, property settlement  Alimony:  Maintenance:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds or  No Yes. Give s about you a and t  Family support Examples: Past	wed to you specific information It them, including whet already filed the return the tax years  rt t due or lump sum alim	ther is nony, spousal support	t, child support, maintenance, div	State: Local:  rorce settlement, property settlement  Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds or  ✓ No  ☐ Yes. Give s abou you a and t  Family suppoi Examples: Past ✓ No ☐ Yes. Give s  Other amount	wed to you  specific information at them, including whete already filed the returns the tax years  rt t due or lump sum alim specific information	ther as an		State: Local:  rorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds or  ✓ No  ☐ Yes. Give s abou you a and t  Family suppoi Examples: Past ✓ No ☐ Yes. Give s  Other amount Examples: Unp	wed to you  specific information at them, including whete already filed the returns the tax years  rt t due or lump sum alim specific information	ther is nony, spousal support	disability benefits, sick pay, vacat	State: Local:  rorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds or  ✓ No  Yes. Give s abou you a and t  Family suppoi Examples: Past ✓ No  Yes. Give s  Other amount Examples: Unp Soc	wed to you  specific information at them, including whete already filed the returns the tax years  rt t due or lump sum alim specific information  specific information	ther is nony, spousal support	disability benefits, sick pay, vacat	State: Local:  rorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds or  ✓ No  ☐ Yes. Give s abou you a and t  Family support Examples: Past ✓ No ☐ Yes. Give s  Other amount Examples: Unp Soc	wed to you  specific information at them, including whete already filed the returns the tax years  rt t due or lump sum alim specific information  specific information	ther is nony, spousal support	disability benefits, sick pay, vacat	State: Local:  rorce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

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Deb	otor 1 Chaina	Trotter	Case number (if known)	
	First Name Middle Name	Last Name		
31.	Interests in insurance policies  Examples: Health, disability, or life insurance; health	h savings account (HSA); credit, hor	meowner's, or renter's insurance	
	Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
32.	Any interest in property that is due you from so If you are the beneficiary of a living trust, expect property because someone has died.  V No Yes. Describe		are currently entitled to receive	
33.	Claims against third parties, whether or not you Examples: Accidents, employment disputes, insuration No  Yes. Describe		emand for payment	
34.	Other contingent and unliquidated claims of eto set off claims  No Yes. Describe	every nature, including countercla	aims of the debtor and rights	
35.	Any financial assets you did not already list  No Yes. Describe			
36.	Add the dollar value of all of your entries from for Part 4. Write that number here			\$230.00
Part	5: Describe Any Business-Related Pr	operty You Own or Have ar	Interest In. List any real estate	in Part 1.
37.	Do you own or have any legal or equitable inte	rest in any business-related prope	erty?	
	✓ No. Go to Part 6.  Yes. Go to line 38.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	C p	Current value of the cortion you own? Do not deduct secured claims or exemptions
38.	Accounts receivable or commissions you alrea	dy earned		
	✓ No  Yes. Describe			
39.	Office equipment, furnishings, and supplies Examples: Business-related computers, software,  No	modems, printers, copiers, fax machi	nes, rugs, telephones, desks, chairs, electro	onic devices
	Yes. Describe			

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Deb	tor 1 Chaina		Trotter	Case number (if known)	
40	First Name	Middle Name	Last Name		
40.		Juipment, supplies you	use in business, and tools of y	our trade	
	<b>✓</b> No				7
	Yes. Describe				
41.	Inventory				
	<b>✓</b> No				
	Yes. Describe				1
	_				
42	Interests in partnersh	ins or joint ventures			
72.	✓ No	ips of joint ventures			
	_		Name of entity:	% of ownership:	
	Yes. Give specific information about				
	them			· -	<u> </u>
				· · · · · · · · · · · · · · · · · · ·	_
				· · · · · · · · · · · · · · · · · · ·	
43. (	Customer lists, mailing	lists, or other compilat	tions		
	<b>✓</b> No				
	Yes. Do your lists in	clude personally identifial	ble information (as defined in 11 U	.S.C. § 101(41A))?	
	☐ No				
	Yes. Desc	ribe			
	_				
44.	Any business-related	property you did not alre	eady list		
	✓ No				
	Yes. Give specific				
	information				
					<u> </u>
			=		
45. A	dd the dollar value of a	all of your entries from F	Part 5, including any entries for	pages you have attached	
for P	art 5. Write that number	r here		<b></b>	
Part	Describe Any I	Farm- and Commer	cial Fishing-Related Prop	erty You Own or Have an Interes	t In.
	If you own or have a	n interest in farmland, list it	t in Part 1.		
46.	Do you own or have a	any legal or equitable in	terest in any farm- or commerci	al fishing-related property?	
	✓ No. Go to Part 7.				Current value of the portion you own?
	Yes. Go to line 47.				Do not deduct secured
					claims
17	Farm animals				or exemptions
41.	Examples: Livestock, po	oultry, farm-raised fish			
	√ No				
	Yes. Describe				1
	100. 20001150				

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Deb	tor 1 Chaina	Middle Norce	Trotter	Case number (if known)	
40	First Name	Middle Name	Last Name		
48.	Crops-either growing	or narvested			
	✓ No				
	Yes. Describe				
49.	Farm and fishing equip	oment, implements, machinery, fixt	ures, and tools of trade		
	✓ No				
	Yes. Describe				
<b>5</b> 0	Farm and fishing a comm	lies showingle and food			
50.	_	lies, chemicals, and feed			
	✓ No				
	Yes. Describe				
				,	
51.	Any farm- and commer	cial fishing-related property you did	d not already list		
	<b>✓</b> No				
	Yes. Describe				
		l of your entries from Part 6, includi here			
Part	7: Describe All Pro	operty You Own or Have an I	nterest in That You	Did Not List Above	
		perty four Own of mave and		Did Not List Above	
00.		s, country club membership	y not:		
	✓ No				
	Yes. Give specific				<del></del>
	information				
54. A	dd the dollar value of all	of your entries from Part 7. Write t	hat number here	<b>&gt;</b>	
Part	8: List the Totals	of Each Part of this Form			
55 <b>C</b>	Part 1: Total roal octato	ine 2		_	
JJ. F	-art 1. Total real estate, i	III 6 2			
56. <b>p</b>	part 2 total vehicles, line	5	\$5250.00		
57. <b>P</b>	art 3: Total personal an	d household items, line 15		_	
	-		\$1850.00	_	
	art 4: Total financial ass		\$230.00	_	
59. <b>F</b>	Part 5: Total business-re	elated property, line 45		_	
60. <b>F</b>	Part 6: Total farm- and fi	shing-related property, line 52			
61. <b>F</b>	Part 7: Total other prope	rty not listed, line 54		_	
		Add lines 56 through 61			
J∠. I	otal porsonal property.	, was in 100 00 till ought of	\$7330.00	Copy personal property total ►	+ \$7330.00
					Ф7000 00
62 <b>T</b>	otal of all property on S	chedule A/B. Add line 55 + line 62			\$7330.00
0.5.					

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Debtor 1	Chaina		Trotter	Case number (if known)		
	First Name	Middle Name	Last Name			
Sche	dule A/B: Pro	perty. Addition	onal page			
Part 3:	Describe Your Perso	onal and Household	d Items			
Do you	ı own or have any le	gal or equitable int	erest in any of the fo	ollowing items?	Current value of the portion you own?	
					Do not deduct secured claims or exemptions.	
7.2. Ele	ctronics					
No						

\$250.00

✓ Yes. Describe...

Apple Watch

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	ation to identify your cas	<b>0.</b>	
Debtor 1	Chaina		Trotter
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing	First Name	Middle Name	Last Name
United States Ba	ankruptcy Court for the:	Northern	District of Illinois
		-	(State)
Case number			, ,
(If known)			

#### Official Form 106C

#### Check if this is an amended filing

#### Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Par	t 1: Identify the Property You Cla	im as Exempt			
1.	Which set of exemptions are you claim  ✓ You are claiming state and federal nont  — You are claiming federal exemptions. 1  For any property you list on Schedule A	pankruptcy exemptions. 1 1 U.S.C. § 522(b)(2)	11 U.S.C. § 522(b)(3)		
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption.	Specific laws that allow exemption	
	Brief description:  used clothing and apparel  Line from Schedule A/B: 11	\$450.00	\$450.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a)	
	Brief description: miscellaneous household goods and furnishings Line from Schedule A/B: 06	\$650.00	\$650.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)	
3.					

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Debtor 1 Chaina First Name	Middle N		Trotter Last Name	Case number (if known)	
	ivildale iv	arrie i	Last Name		
Part 2: Additional Page					
Brief description of the pline on Schedule A/B that property		Current value of the portion you own Copy the value from Schedule A/B		exemption you claim box for each exemption.	Specific laws that allow exemption
Brief description:  NetSpend Prepaid D Card  Line from Schedule A/B:  17	Debit	\$230.00		\$230.00 r market value, up to any statutory limit	735 ILCS 5/12-1001(b)
Brief description: miscellaneous household electroni cell phone, iPad, use television		\$350.00		\$350.00 r market value, up to any statutory limit	735 ILCS 5/12-1001(b)
Schedule A/B: 07 Brief description:	<u> </u>	\$5,250.00	<b></b>		735 ILCS 5/12-1001(c)
Ford Taurus, 2008, u 2008 Ford Taurus wi 169,676 miles			100% of fail	\$0 r market value, up to any statutory limit	_
Line from Schedule A/B: 03					
Brief description: miscellaneous costu jewelry Line from	ıme	\$150.00		\$150.00 r market value, up to any statutory limit	735 ILCS 5/12-1001(b)
Schedule A/B: 12 Brief description:		\$250.00	<b>✓</b>	\$250.00	735 ILCS 5/12-1001(b)
Apple Watch Line from				r market value, up to any	_

Schedule A/B:

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					_		
Fill in	this inform	nation to identify your case	:				
Debt	or 1	Chaina		Trotter			
200.		First Name	Middle Name	Last Name			
Debt	or 2						
(Spo	use, if filing	First Name	Middle Name	Last Name			
Unite	ed States B	ankruptcy Court for the:	Northern	District of Illinois (State)			
Case (If kno	number own)			(Glaic)			
Off	icial F	orm 106D			1		heck if this is an
Sc	hedu	le D: Credit	ors Who Ha	ve Claims Secui	red by Pro	perty	12/15
Be as space	complete is needed	and accurate as possib	le. If two married people	e are filing together, both are equa ne entries, and attach it to this form	lly responsible for s	upplying correct inform	
1.	Do any cre	editors have claims secu	red by your property?				
	No. CI	neck this box and submit th	nis form to the court with yo	our other schedules. You have nothing	else to report on this	form.	
	✓ Yes. F	ill in all of the information b	pelow.				
Part	1: List	All Secured Claims					
2.	for each o		ditor has a particular claim	red claim, list the creditor separately n, list the other creditors in Part 2. As ng to the creditor's name.	Column A  Amount of claim  Do not deduct the value of collateral.	Column B  Value of collateral that supports this claim	Column C Unsecured portion If any
2.1		nance Corp	Describe the property	that secures the claim:	\$14,431.00	\$5,250.00	\$9,181.00
	P.O. Box Number	166008	2008 Ford Taurus with 1				
	Irving	Texas 75016	Unliquidated				
	City	State ZIP Code	Disputed				
		es the debt? Check one.	Nature of lien. Check a	all that apply			
		or 1 only or 2 only		made (such as mortgage or secured			
		or 1 and Debtor 2 only	car loan)	naab (cach ab mengage en cocarea			
		ast one of the debtors and	Statutory lien (such	as tax lien, mechanic's lien)			
	anoth	ner	Judgment lien from	a lawsuit			
		ck if this claim relates community debt	Other (including a ri	ght to offset)			
	Date deb		Last 4 digits of accou	nt number 1001			
		Add the dollar value of y number here:	your entries in Column	A on this page. Write that	\$14,431.00		

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Fill i	n this informa	ation to identify your cas	e:					
Deb		Chaina First Name	Middle Name	Trotter Last Name	_			
	otor 2 ouse, if filing)	First Name	Middle Name	Last Name	_			
		nkruptcy Court for the:	Northern	District of Illinois (State)	_			
	e number nown)				_			
Off	icial Fo	orm 106E/F				Che	eck if this is an	n amended filing
Sc	hedu	le E/F: Cre	ditors Who	Have Unsecu	red Claims			12/15
party 106A that a entric know	to any exect /B) and on sare listed in es in the bo /n).	cutory contracts or un- Schedule G: Executor Schedule D: Creditor xes on the left. Attach	expired leases that could y Contracts and Unexpire s Who Hold Claims Secul the Continuation Page to	rs with PRIORITY claims and result in a claim. Also list exect d Leases (Official Form 106G) red by Property. If more space of this page. On the top of any	cutory contracts on <i>Sch</i> b. Do not include any cre c is needed, copy the Pa	edule A/B: editors with art you need	Property (Of partially sec d, fill it out, n	fficial Form cured claims number the
Part	List A	II of Your PRIORI	TY Unsecured Claims	3				
1.		ditors have priority un to Part 2.	secured claims against y	ou?				
2.	listed, identi much as po Continuatio	fy what type of claim it is ssible, list the claims in a n Page of Part 1. If more	s. If a claim has both priority a alphabetical order according than one creditor holds a p	ore than one priority unsecured and nonpriority amounts, list that to the creditor's name. If you hat particular claim, list the other creor this form in the instruction book	claim here and show both we more than two priority ditors in Part 3.	n priority and	nonpriority an	mounts. As
						Total	Priority	Nonpriority

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Debto										
	First Name Middle Name Last N	Name								
Part 2	List All of Your NONPRIORITY Unsecured Claims									
3.	Do any creditors have nonpriority unsecured claims against you	?								
1	No. You have nothing to report in this part. Submit this form to the									
i	✓ Yes.									
	<u> </u>	and an of the constituence in a bedden and believe if a conflict become on the constituence of the								
	ist all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority									
	unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. f more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than four priority unsecured claims fill out the Continuation									
	Page of Part 2.	on the determination of the first priority unbooking claims in out the continuation								
		Total claim								
4.1	ARS									
4.1	Nonpriority Creditor's Name	Last 4 digits of account number 7412 \$483.00								
	1801 NW 66TH AVE SUITE 200	When was the debt incurred? 2/1/2016								
	Number Street	As of the date you file, the claim is: Check all that apply.								
		Contingent								
	FORT Florida 33313	i i								
	LAUDERDAL City State 7in Code	Unliquidated								
	City State Zip Code Who incurred the debt? Check one.	Disputed								
	Debtor 1 only	Type of NONPRIORITY unsecured claim:								
	Debtor 2 only	Student loans								
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce								
	<b>!</b>	that you did not report as priority claims								
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar								
	Check if this claim relates to a community debt	debts								
	Is the claim subject to offset?	Collection; Collecting for ORIGINAL CREDITOR:								
	✓ No	Other. Specify MEDICAL								
	Yes									
4.2	ARS	Last 4 digits of account number 9317 \$483.00								
	Nonpriority Creditor's Name	Last 4 digits of account number								
	1801 NW 66TH AVE SUITE 200 Number Street	When was the debt incurred?5/1/2016								
	Nambor Street	As of the date you file, the claim is: Check all that apply.								
	FORT	Contingent								
	FORT Florida 33313 LAUDERDAL	Unliquidated								
	City State Zip Code	Disputed								
	Who incurred the debt? Check one.	-								
	Debtor 1 only	Type of NONPRIORITY unsecured claim:								
	Debtor 2 only	Student loans								
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce								
	At least one of the debtors and another	that you did not report as priority claims								
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts								
	Is the claim subject to offset?	Collection; Collecting for								
	No	ORIGINAL CREDITOR:								
	Yes	Other. Specify MEDICAL								
4.3	ARS Nonpriority Creditor's Name	Last 4 digits of account number								
	1801 NW 66TH AVE SUITE 200	When was the debt incurred?12/1/2015								
	Number Street	As of the date you file, the claim is: Check all that apply.								
		Contingent								
	FORT Florida 33313	<b>=</b>								
	LAUDERDAL City State Zip Code	Unliquidated								
	City State Zip Code Who incurred the debt? Check one.	Disputed								
	Debtor 1 only	Type of NONPRIORITY unsecured claim:								
	Debtor 2 only	Student loans								
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce								
	At least one of the debtors and another	that you did not report as priority claims								
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts								
	Is the claim subject to offset?	Collection; Collecting for								
	No	ORIGINAL CREDITOR:								
	Ves	Other. Specify MEDICAL								

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Debtor 1 Chaina Trotter Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 \$324.00 ARS Last 4 digits of account number \_ Nonpriority Creditor's Name 1801 NW 66TH AVE SUITE 200 When was the debt incurred? 7/1/2016 Number As of the date you file, the claim is: Check all that apply. Contingent **FORT** Florida 33313 Unliquidated LAUDERDAL State Zip Code City Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts **✓** Collection; Collecting for Is the claim subject to offset? ORIGINAL CREDITOR: **✓** No Other. Specify **MEDICAL** Yes 4.5 ARS \$324.00 Last 4 digits of account number 8318 Nonpriority Creditor's Name 1801 NW 66TH AVE SUITE 200 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent **FORT** 33313 Florida Unliquidated LAUDERDAL State City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt  $\overline{}$ Collection; Collecting for Is the claim subject to offset? ORIGINAL CREDITOR: **V** No **MEDICAL** Other. Specify Yes 4.6 ARS \$215.00 Last 4 digits of account number \_ Nonpriority Creditor's Name 1801 NW 66TH AVE SUITE 200 When was the debt incurred? 7/1/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent **FORT** Florida 33313 Unliquidated LAUDERDAL City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts **✓** Collection; Collecting for Is the claim subject to offset? ORIGINAL CREDITOR: **✓** No **MEDICAL** Other. Specify

Yes

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Debtor 1 Chaina Trotter Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.7 City of Chicago Heights \$200.00 Last 4 digits of account number Nonpriority Creditor's Name 39773 Treasury Center When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Illi<u>nois</u> 60694 Chicago Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify\_ parking tickets **✓** No Yes City of Country Club Hills 4.8 \$1,900.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 7690 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60197 Carol Stream Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt parking tickets Other. Specify \_ Is the claim subject to offset? **✓** No Yes **COMMONWEALTH FINANCIAL** \$433.00 Last 4 digits of account number Nonpriority Creditor's Name 245 Main St When was the debt incurred? 11/1/2015 Street Number As of the date you file, the claim is: Check all that apply. Contingent 18519 Pennsylvania Scranton Unliquidated State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? **✓** 001 Collection; Collecting for **✓** No ORIGINAL CREDITOR:

Yes

Other. Specify

MEDICAL PAYMENT DATA

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Debtor 1 Chaina Trotter Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** ENHANCED RECOVERY CO 4.10 \$318.00 Last 4 digits of account number Nonpriority Creditor's Name 8014 BAYBERRY RD When was the debt incurred? 1/1/2013 Number Street As of the date you file, the claim is: Check all that apply. Contingent **JACKSONVILLE** 32256 Florida Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? 001 Collection; Collecting for **✓** No Other. Specify ORIGINAL CREDITOR: SPRINT Yes 4.11 **ESCALLATE** \$239.00 Last 4 digits of account number Nonpriority Creditor's Name 5200 STONEHAM ROAD SUITE 200 When was the debt incurred? 3/1/2013 Number Street As of the date you file, the claim is: Check all that apply. Contingent **NORTH CANTON** 44720 Ohio Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only |~| Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Collection; Collecting for |√| **✓** No ORIGINAL CREDITOR: Other. Specify **MEDICAL** Yes 4.12 **ESCALLATE** \$239.00 Last 4 digits of account number \_ Nonpriority Creditor's Name 5200 STONEHAM ROAD SUITE 200 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent **NORTH CANTON** Ohio 44720 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? **✓** Collection; Collecting for **✓** No ORIGINAL CREDITOR:

Yes

Other. Specify

MEDICAL

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Chaina Debtor 1 Trotter Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 **ESCALLATE** \$239.00 Last 4 digits of account number Nonpriority Creditor's Name 5200 STONEHAM ROAD SUITE 200 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent **NORTH CANTON** Ohio 44720 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? **V** Collection; Collecting for **✓** No ORIGINAL CREDITOR: Other. Specify **MEDICAL** l Yes FRANKLIN COLLECTION SV 4.14 \$2,302.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2978 W Jackson St 7/1/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent 38801 Tupelo Mississippi Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only **|~**| Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? 001 Collection; Collecting for ORIGINAL CREDITOR: AT T **✓** No Other. Specify | Yes 4.15 **GRAND CANYON UNIVERSIT** \$2,205.00 Last 4 digits of account number 7762 Nonpriority Creditor's Name 3300 W CAMELBACK RD When was the debt incurred? 3/1/2014 Number As of the date you file, the claim is: Check all that apply. Contingent **PHOENIX** Arizona 85017 City Unliquidated State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? ✓ Other. Specify \_\_\_ 001 InstallmentLoan **✓** No

Yes

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Chaina Debtor 1 Trotter Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.16 Illinois Tollway \$103.00 Last 4 digits of account number Nonpriority Creditor's Name 2700 Ogden Ave When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Legal Dept Contingent **Downers Grove** Illinois Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? ✓ Other. Specify tollway violations **✓** No \_\_\_ Yes 4.17 MIDSTATE COLLECTION SO \$503.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2009B Round Barn Rd 1/1/2015 As of the date you file, the claim is: Check all that apply. Contingent 61821 Champaign Illinois Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? 001 Collection; Collecting for **| V** No ORIGINAL CREDITOR: PRAIRIE Other. Specify STATE COLLEGE Yes 4.18 Speedy Cash \$300.00 Last 4 digits of account number \_ Nonpriority Creditor's Name 848 E Sibley Blvd When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60419 Dolton Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts ✓ Other. Specify \_ payday loan Is the claim subject to offset? **✓** No

Yes

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Chaina Debtor 1 Trotter Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** US DEPT OF ED/GLELSI 4.19 \$13,599.00 Last 4 digits of account number \_ Nonpriority Creditor's Name 2401 INTERNATIONAL LN When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent MADISON 53704 Wisconsin Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify **✓** No Yes 4.20 Village of Hazelcrest \$500.00 Last 4 digits of account number Nonpriority Creditor's Name 3000 W. 170th Place When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent 60429 **Hazel Crest** Illinois Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? ✓ Other. Specify \_\_\_\_ parking tickets **✓** No Yes 4.21 Village of Homewood \$260.00 Last 4 digits of account number Nonpriority Creditor's Name 2020 Chestnut Road When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Illinois 60430 Homewood Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? ✓ Other. Specify \_\_\_\_ parking tickets **✓** No

l Yes

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Chaina Debtor 1 Trotter Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** Village of Matteson 4.22 \$312.00 Last 4 digits of account number \_ Nonpriority Creditor's Name 4900 Village Commons When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Illinois 60443 Matteson City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt ✓ Other. Specify \_ parking tickets Is the claim subject to offset? **✓** No Yes 4.23 Village of South Holland \$200.00 Last 4 digits of account number Nonpriority Creditor's Name 16226 Wausau Avenue When was the debt incurred? n/a Street Number As of the date you file, the claim is: Check all that apply. Contingent South Holland Illinois 60473 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify\_ parking tickets **✓** No

Yes

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Chaina Trotter Debtor 1 Case number (if known) First Name Middle Name Last Name Add the Amounts for Each Type of Unsecured Claim Part 4: 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 **Total claims** 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government 6b. \$0.00 6c. Claims for death or personal injury while you were intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$0.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$13,599.00 **Total claims** 6f. Student loans from Part 2 6g. Obligations arising out of a separation agreement or \$0.00 divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar 6h. debts \$12,542.00 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$26,141.00

6j.

6j. Total. Add lines 6f through 6i.

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Debtor 1	Chaina		Trotter
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if fil	ing) First Name	Middle Name	Last Name
United States	Bankruptcy Court for the:	Northern	District of Illinois
United States	Bankrupicy Court for the.	Normem	
Case number	r		(State)

Check if this is a	ıľ
amended filing	

#### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company	y with whom you have th	ne contract or lease	State what the contract or lease is for			
2.1	Scott, Leo Name 4247 Lindenwood Dr A	Apt 3e		Residential Lease, Debtor is Lessee, Residential Yearly Lease			
	Number Street		00440				
	Matteson City	Illinois State	60443 Zip Code				

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						_
Fill in	this inform	nation to identify your cas	e:			
Debte	or 1	Chaina		Trotter		
		First Name	Middle Name	Last Name		
Debto		) <del>-</del>				
(Spot	ise, it tiling	) First Name	Middle Name	Last Name		
Unite	d States B	ankruptcy Court for the:	Northern	District of Illinois		
Casa	number			(State)		
(If kno						
						Check if this is an amended filing
Off	icial F	Form 106H				
Sch	redul	e H: Your Co	ndehtors			12/15
1. [	✓ No Yes	ve any codebtors? (If ye	ou are filing a joint case, do	·	·	
	daho, Louis No. G Yes. D	siana, Nevada, New Mexi o to line 3.	co, Puerto Rico, Texas, Wa	shington, and Wisconsin		ity property states and territories include Arizona, California,
	ت		state or territory did you live?	?	Fill in the na	me and current address of that person.
		Name of your spouse, for	ormer spouse, or legal equiv	valent		
		Number Street				
		City	State	Zip C	ode	
а	gain as a	codebtor only if that po	erson is a guarantor or co	osigner. Make sure yo	ı have liste	ouse is filing with you. List the person shown in line 2 d the creditor on <i>Schedule D</i> (Official Form 106D), Schedule E/F, or Schedule G to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Official Form 106H Schedule H: Your Codebtors page 1

Column 1: Your codebtor

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Fill in this	s information to identif	y your case:						
Debtor 1	Chaina	Middle News	Trotter		_			
Dobtor 2	First Name	Middle Name	Last Na	ame		Check if this is:		
Debtor 2 (Spouse, if f	iling) First Name	Middle Name	Last Na	ame	_	An amended filing	J	
		Northorn	District of Illia	noio		A supplement sho	owing post-petiti	ion chapter 13
United State	es Bankruptcy Court for the:	Northern	District of Illin	tate)	_	expenses as of the		
Case number	er				_	MM / DD / YYYY		
	I Forms 4001					WIWI / DD / TTTT		
	Form 106							
Scnea	ule I: Your Inc	ome						12/15
	Describe Employme	ame and case number	r (if known).	Answer eve	ery question	ı. 		
	Fill in your employment		Debtor 1			Debtor 2		
i	nformation.	Employment status	<b>✓</b> Employe	ed		Employed		
	If you have more than one ob,		Not Em			Not Employed		
8	attach a separate page with	Occupation	teacher					
6	employers.	Employer's name	Calumet Cir	ty Kid's Academ	y, LLC	_		
	nclude part time, seasonal,	Employer's address	670 River Oaks Dr					
	or self-employed work.		Number Stree	et		Number Street		
(	Occupation may include					<u> </u>		
	student or homemaker, if it applies.							
`	or nomericator, in applico.		Calumet City	Illinois	60409	City	State Zip	o Code
			City	State	Zip Code	<u> </u>	·	
		How long employed there?	4 years				<u></u>	
		there:						
Part 2:	Give Details About	Monthly Income						
Estimate i you are sep	.*	date you file this form. If yo	ou have nothing	to report for any	line, write \$0 in	the space. Include you	ır non-filing spou	use unless
	our non-filing spouse have mo eparate sheet to this form.	ore than one employer, combi	ine the information	on for all employ	ers for that perso	on on the lines below. If	you need more	space,
				For D	ebtor 1	For Debtor 2 or non-filing spouse	,	
		ry, and commissions (befor alculate what the monthly wag		2.	\$1,989.76		_	
	nate and list monthly over			3.	+ \$0.00			

Official Form 106I Schedule I: Your Income page 1

\$1,989.76

4. Calculate gross income. Add line 2 + line 3.

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Debtor 1		I rotter	Case number	(if known)	
	First Name Middle Name I	Last Name	For Debtor 1	For Debtor 2 or non-filing spouse	
Copy I	line 4 here	<b>→</b> 4.	\$1,989.76		
5. List all	payroll deductions:				
5a. <b>Ta</b>	x, Medicare, and Social Security deductions	5a	\$286.44		
5b. <b>M</b> a	andatory contributions for retirement plans	5b	\$0.00		
5c. <b>Vo</b>	luntary contributions for retirement plans	5c	\$0.00		
5d. <b>Re</b>	equired repayments of retirement fund loans	5d	\$0.00		
5e. Ins	surance	5e	\$0.00		
5f. <b>Do</b>	mestic support obligations	5f	\$0.00		
5g. <b>U</b> r	nion dues	5g	\$0.00		
5h. <b>Ot</b>	her deductions. Specify:	5h. + _	\$0.00 +		
6. <b>Add th</b> +5h.	e payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f +	+ 5g 6	\$286.44		
7. Calcula	ate total monthly take-home pay. Subtract line 6 from line 4.	. 7	\$1,703.32		
8. List all	other income regularly received:				
bu	et income from rental property and from operating a siness, profession, or farm	_			
rec	ach a statement for each property and business showing gross ceipts, ordinary and necessary business expenses, and the tota onthly net income.		\$0.00		
8b. <b>Int</b>	terest and dividends	8b	\$0.00		
de	mily support payments that you, a non-filing spouse, or a pendent regularly receive	a			
	clude alimony, spousal support, child support, maintenance, rorce settlement, and property settlement.	8c	\$0.00		
8d. <b>U</b> r	nemployment compensation	8d	\$0.00		
8e. <b>So</b>	ocial Security	8e	\$0.00		
Incl ass the	ner government assistance that you regularly receive lude cash assistance and the value (if known) of any non-cash sistance that you receive, such as food stamps (benefits under Supplemental Nutrition Assistance Program) or housing soldies				
Spe	ecify: Food Assistance Programs Income	8f	\$225.00		
8g. <b>Pe</b>	ension or retirement income	8g	\$0.00		
8h. <b>Ot</b>	her monthly income. Specify:	8h. +	\$0.00 +		
9. Add all	I other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8	3h. 9	\$225.00		
10. <b>Calcul</b> Add th	late monthly income. Add line 7 + line 9. ne entries in line 10 for Debtor 1 and Debtor 2 or non-filing spor	10	\$1,928.32 +	=	\$1,928.32
Include relative	all other regular contributions to the expenses that you be contributions from an unmarried partner, members of your houses.  It include any amounts already included in lines 2-10 or amounts	usehold, your deper	•		
Specif	y:			11	1. + \$0.00
	he amount in the last column of line 10 to the amount in				2. \$1,928.32
vviile t	hat amount on the Summary of Schedules and Statistical Sumr	nary or Certain Liab	iiilies ariu reialeu Data,	п к аррпез	Combined monthly income
✓ N	ou expect an increase or decrease within the year after you	u file this form?			mondy moone
Ш	es. Explain:				

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Fill in this infor	nation to identify your c	ase.			
		asc			
Debtor 1	Chaina First Name	Middle Name	Trotter  Last Name		
Debtor 2	i iist ivailie	Middle Name	Lastivanie	Check if this is:	
(Spouse, if filin	g) First Name	Middle Name	Last Name	An amended filing	7
United States E	Bankruptcy Court for the	: Northern	District of Illinois (State)	A supplement sho	owing post-petition chapter 13
Case number			(State)	expenses as of th	e following date:
(If known)				MM / DD / YYYY	<del>,</del>
Official	Form 106J				
	le J: Your E	ynenses			12/1
		-	. filian to noth on the she are annually		
			e filing together, both are equally form. On the top of any additiona		
(if known). Ans	wer every question.				
Part 1: Des	cribe Your House	hold			
1. Is this a join	nt case?				
✓ No. Go	to line 2				
Yes. D	oes Debtor 2 live in a	separate household?			
г	No				
		file Official Forms 106 L2 Evnen	ses for Separate Household of Debt	or 2	
2. Do you hav	<del>-</del>	No	see for coparate Floaderiola of Bost	OI	
dependents?	е Ц	140			
Do not list D		Yes. Fill out this information for	Dependent's relationship to	Dependent's	Does dependent live
Debtor 2.		each dependent	Debtor 1 or Debtor 2	age	with you?
			Child	5 years	✓ Yes.
3. Do your ex	penses include				
expenses of		No			
than yourself and	d vour	Yes			
dependent	•				
Part 2: Esti	mate Your Ongoin	g Monthly Expenses			
			very are resinanthic form on a crem	Nament in a Chapter 41	December was next
_			you are using this form as a supp plemental Schedule J, check the	•	-
applicable da	te.				
	•	-cash government assistance I it on Schedule I: Your Income	-		Your expenses
	or home ownership ear the ground or lot. 4.	xpenses for your residence. In	clude first mortgage payments and		<b>\$825.00</b>
If not incl	uded in line 4:				
4a. Real e	state taxes				4a <b>\$0.00</b>
4b. Proper	ty, homeowner's, or ren	ter's insurance			4b. <b>\$0.00</b>
4c. Home	maintenance, repair, and	d upkeep expenses			4c. <b>\$0.00</b>
4d. Home	owner's association or c	ondominium dues			4d. <b>\$0.00</b>

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Trotter

Debtor 1

Chaina Case number (if known) First Name Middle Name Last Name Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$100.00 6a. 6b. Water, sewer, garbage collection \$0.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$45.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$300.00 7. 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning 9. \$100.00 10. Personal care products and services \$50.00 10. 11. Medical and dental expenses \$0.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$100.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance 15c \$58.00 15d. Other insurance. Specify: \_\_\_ 15d \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a \$0.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes. \$0.00 20h 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

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Debtor 1	Chaina		Trotter	Case number (if known)		
	First Name	Middle Name	Last Name			
21.Other	. Specify:				21	\$0.00
	ılate your monthly ex	penses.				\$1,578.00
22a. A	add lines 4 through 21.					\$0.00
22b. C	Copy line 22 (monthly e	xpenses for Debtor 2), if any, fro	m Official Form 106J-2			\$1,578.00
22c. A	dd line 22a and 22b. T	he result is your monthly expens	ses.		22.	
23.Calcu	late your monthly ne	t income.				
23a. C	Copy line 12 (your comb	pined monthly income) from Sch	edule I.		23a	\$1,928.32
23b. C	Copy your monthly expe	nses from line 22 above.			23b	\$1,578.00
23c. S	Subtract your monthly ex	penses from your monthly inco	me.			\$350.32
•	The result is your mont	hly net income.			23c	<u></u>
24. <b>Do y</b> o	ou expect an increase	e or decrease in your expens	es within the year after you	ı file this form?		
Fore	example do vou expect	to finish paying for your car loan	n within the year or do you ex	nect vour		
		ase or decrease because of a n				
<b>✓</b> N	No					
	⁄es					
_	Explain here:					
	Explain Here.					

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Fill in this information to identify your case:								
Debtor 1	Chaina		Trotter					
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse, if fill	ing) First Name	Middle Name	Last Name					
United States	Bankruptcy Court for the:	Northern	District of Illinois (State)					
Case number (If known)	·		(Otale)					

#### Official Form 106Dec

### Check if this is an amended filing

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t1: Sign Below	
	Did you pay or agree to pay someone who is NOT an attorney to h	elp you fill out bankruptcy forms?
	<b>☑</b> No	
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
	Under penalty of perjury, I declare that I have read the summary at that they are true and correct.	nd schedules filed with this declaration and
×	/s/ Chaina Trotter	×
	Signature of Debtor 1	Signature of Debtor 2
	Date 10/19/2016	Date
	MM/DD/YYYY	MM/DD/YYYY

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	irriation to lacin	tify your case	<del>3</del> .					
or 1	Chaina		N 41 - L - II -	Trotter				
or 2	First Name		Middle	Name Last Nar	ne			
	ing) First Name		Middle	Name Last Nar	me			
d States	Bankruptcy Co	urt for the	Northern	District of Illin	oie			
Jolales	bankruptcy Cc	uit ioi tile.	Northern	(Sta				
number wn)	·							
wii)								Check if this
cial	Form 1	07						amended fil
tem	ent of F	inanci	ial Affair	s for Individu	als Filing f	or Bai	nkruptcy	/
				ed people are filing togeth On the top of any addition				
Giv	/e Details A	bout Your	Marital Stati	us and Where You Li	ved Before			
What i	is your curren	t marital sta	atus?					
_	-							
	arried ot married							
<b>V</b> 140	otmanica							
During	the last 3 year							
	, ,	rs, nave you	u lived anywhere	e other than where you liv	e now?			
□ No	-	irs, nave you	u lived anywhere	e other than where you liv	e now?			
☐ No	0		•	e other than where you live				
☐ No	0		•	·				
☐ No ✓ Ye	0		•	·				Dates Debtor 2 live
☐ No ✓ Ye	o es. List all of the		•	ears. Do not include where	you live now.	otor 1		there
No Ve	o es. List all of the ebtor 1:	places you li	ived in the last 3 y	ears. Do not include where	you live now.  Debtor 2:	otor 1		there
No Ye	o es. List all of the	places you li	ived in the last 3 y	ears. Do not include where	you live now.  Debtor 2:	otor 1		there
No Ye	o es. List all of the ebtor 1:	places you li	ived in the last 3 y	Pates Debtor 1 lived there	pyou live now.  Debtor 2:  Same as Del	otor 1		there Same as Debtor
No Ye	es. List all of the ebtor 1: 247 Lindenwood	places you li	ived in the last 3 y	Dates Debtor 1 lived there  From 04/2008	pyou live now.  Debtor 2:  Same as Del	otor 1		Same as Debtor
No Ye	oes. List all of the ebtor 1: 247 Lindenwood umber Street atteson	places you li	ived in the last 3 y	Dates Debtor 1 lived there  From 04/2008	pyou live now.  Debtor 2:  Same as Del	otor 1	Zip Code	there Same as Debtor From
De	oes. List all of the ebtor 1: 247 Lindenwood umber Street atteson	places you li  Drive Apt 3V	ived in the last 3 y	Dates Debtor 1 lived there  From 04/2008	Debtor 2:  Same as Del  Number Street	State	Zip Code	there Same as Debtor From
No. Ye  De  422 Nu  Ma Cit	es. List all of the ebtor 1:  247 Lindenwood umber Street  atteson	places you li  Drive Apt 3V	ived in the last 3 y	Pears. Do not include where your pates Debtor 1 lived there  From 04/2008  To 04/2016	Debtor 2:  Same as Del  Number Street  City  Same as Del	State	Zip Code	there  Same as Debtor  From To  Same as Debtor
No. Ye  De  422 Nu  Ma Cit	oes. List all of the ebtor 1: 247 Lindenwood umber Street atteson	places you li  Drive Apt 3V	ived in the last 3 y	Pates Debtor 1 lived there  From 04/2008 To 04/2016  From	Debtor 2:  Same as Del  Number Street  City	State	Zip Code	there  Same as Debtor  From To Same as Debtor  From From
No. Ye  De  422 Nu  Ma Cit	es. List all of the ebtor 1:  247 Lindenwood umber Street  atteson	places you li  Drive Apt 3V	ived in the last 3 y	Pears. Do not include where your pates Debtor 1 lived there  From 04/2008  To 04/2016	Debtor 2:  Same as Del  Number Street  City  Same as Del	State	Zip Code	there  Same as Debtor  From To  Same as Debtor
No. Ye  De  422 Nu  Ma Cit	es. List all of the ebtor 1:  247 Lindenwood umber Street  atteson ity	places you li  Drive Apt 3V	ived in the last 3 y	Pates Debtor 1 lived there  From 04/2008 To 04/2016  From	Debtor 2:  Same as Del  Number Street  City  Same as Del	State	Zip Code	there  Same as Debtor  From To Same as Debtor  From From

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

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Deb	tor 1	Chaina	Trotter		number (if known)	
			Name Last Na	me		
Part	2:	Explain the Sources of Your	Income			
	Fill i	you have any income from employm in the total amount of income you receive vities. If you are filing a joint case and you No Yes. Fill in the details.	ed from all jobs and all busine	esses, including part-time		ears?
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		rom January 1 of current year until ne date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	\$16632.05	Wages, commissions, bonuses, tips Operating a business	
		or last calendar year: anuary 1 to December 31, 2015 )  YYYY	Wages, commissions, bonuses, tips Operating a business	\$20857.00	☐ Wages, commissions, bonuses, tips ☐ Operating a business	
		or the calendar year before that: anuary 1 to December 31, 2014 ) YYYY	Wages, commissions, bonuses, tips Operating a business	\$20000.00	Wages, commissions, bonuses, tips Operating a business	
 	Inclui bene case List e	you receive any other income during de income regardless of whether that income fit payments; pensions; rental income; ir and you have income that you received each source and the gross income from No  Yes. Fill in the details.	come is taxable. Examples of nterest; dividends; money coll together, list it only once unde	other income are alimony; chected from lawsuits; royalties er Debtor 1.	; and gambling and lottery winn	
•			Debtor 1		Debtor 2	
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
		from January 1 of current year until he date you filed for bankruptcy:	YTD LINK	\$1,800.00		
		For last calendar year:  January 1 to December 31, 2015 )  YYYYY	2015 LINK	\$1,350.00		
		For the calendar year before that:  January 1 to December 31, 2014 )  YYYYY	2014 LINK	\$1,350.00		

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	Chaina First Name		Middle Name	I rotter Last Name	Case numb	er (if known)	
		Payments		efore You Filed for	Bankruntev		
	-ist ocitain	1 dyllicitis	Tou made Be	crore rour ricu for	Bunkruptcy		
re ei	ther Debtor 1'	s or Debtor 2	's debts primari	ily consumer debts?			
N			btor 2 has prim mily, or househol		Consumer debts are defined i	n 11 U.S.C. § 101(8) as "inc	urred by an individual
	During the 9	00 days before	you filed for bank	kruptcy, did you pay any cre	editor a total of \$6,425* or mo	re?	
	No. Go	to line 7.					
	to	otal amount yo	u paid that credit	or. Do not include paymen	t or more in one or more payr ts for domestic support obliga an attorney for this bankrupt	ations, such as	
	* Subject to	adjustment on	4/01/19 and eve	ry 3 years after that for cas	es filed on or after the date o	adjustment.	
<b>7</b>	es. <b>Debtor 1 o</b>	r Debtor 2 or	both have prim	narily consumer debts.			
	During the 9	00 days before	you filed for bank	kruptcy, did you pay anv cre	editor a total of \$600 or more?		
	_	to line 7.	,	. ,, , , , , , , , , , , , , , , , , ,	,		
	tl	nat creditor. Do	not include pay		more and the total amount y rt obligations, such as child s is bankruptcy case.		
				Dates of payment	Total amount paid	Amount you still owe	Was this payment for
(	Creditor's Name	)					Mortgage
1	lumber Street						Car Credit card
-							Loan repayment  Suppliers or
C	City	State	Zip Code				vendors  Other
C	Creditor's Name	<b>;</b>					Mortgage Car
Ī	lumber Street						Credit card
_							Loan repayment
<u>-</u>	City	State	Zip Code				Suppliers or vendors
	··· <i>y</i>	31010	_,, 0000				Other
-	Creditor's Name	<u> </u>		-			Mortgage
_		•					Car
١	lumber Street						Credit card
-							Loan repaymen  Suppliers or
C	City	State	Zip Code				vendors
							Othor

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Debtor 1	Chaina First Name	Middle Name		otter st Name	Case number (	if known)
Insic corp ager	nin 1 year before you filed lers include your relatives; a orations of which you are a nt, including one for a busing as child support and alimo	any general partners n officer, director, pe ess you operate as a	; relatives of any rson in control, or	general partners; par r owner of 20% or mo	tnerships of which y ore of their voting se	ou are a general partner; curities; and any managing
<b>✓</b>	No Yes. List all payments to an	n insider.	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name					
	Number Street					
	City State	Zip Code				
	Insider's Name					
	Number Street					
	City State	Zip Code				
insic Inclu		anteed or cosigned b		payments or trans	fer any property o	n account of a debt that benefited an
			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment  Include creditor's name
						indude dealtors harrie
	Insider's Name					
	Number Street					
	City State	Zip Code				
	Insider's Name					
	Number Street					
	City State	Zip Code				

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Debt	tor 1	Chaina			Trotter	c	ase number (if i	known)	
		First Name	Middle Na	me	Last Name				
Part	4:	Identify Legal A	Actions, Reposs	essions,	and Foreclosure	S			
l	_ist a	Il such matters, inclu act disputes.	ou filed for bankrupto uding personal injury c						ng? r custody modifications, and
		No Yes. Fill in the detail:	S.						
				Nature	of the case	Court or a	gency		Status of the case
		Case title							Pending
						Court Nam	ie		On appeal
		Case number				NumberStr	reet		Concluded
						City	State	Zip Code	
		Case title							Pending
						Court Nam	ie		On appeal
		Case number				NumberStr	eet		Concluded
						City	State	Zip Code	
	<b>✓</b>	No. Go to line 11. Yes. Fill in the infor	mation below.		Describe the propo	erty		Date	Value of the property
		Creditor's Name							<u> </u>
				<u> </u>	Explain what happ	ened			
		Number Street			Droporty woo ro	nonnonnd			
		-			Property was re				
					Property was ga	arnished.			
		City	State Zip C	Code	Property was at	tached, seized,	or levied.		
					Describe the prope	erty		Date	Value of the property
		Creditor's Name							<del></del>
					Explain what happ	ened			
		Number Street		_ <del>_</del>					
					Property was re				
					Property was fo Property was ga				
		City	State Zip C	Code	Property was at		or levied.		

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Deb	tor 1	Chaina		Trotter	Case number (if known)		
		First Name	Middle Name	Last Name			
11.		hin 90 days before you filed for ounts or refuse to make a paym			ank or financial institution, s	set off any amou	nts from your
	<b>✓</b>	No Yes. Fill in the details.					
				Describe the action the	e creditor took	Date action was taken	Amount
		Creditor's Name					
		Number Street		Last 4 digits of account n	umber: XXXX-		
		City State	Zip Code	Ü			
12.		hin 1 year before you filed for b ointed receiver, a custodian, or		of your property in the p	possession of an assignee f	or the benefit of	creditors, a court-
	<b>Y</b>	No Yes					
Part	: Э:	List Certain Gifts and Co	ntributions				
13.	Wi	ithin 2 years before you filed for	r bankruptcy, did yo	u give any gifts with a to	otal value of more than \$600	per person?	
	✓						
	L	Yes. Fill in the details for each g					
		Gifts with a total value of mor per person	e than \$600	Describe the gifts		Dates you gave the gifts	Value
			N. C.				
		Person to Whom You Gave the G	<u>Ш</u>				
		Number Street					
		City State Person's relationship to you	Zip Code				
		Person to Whom You Gave the G	Sift				
		Number Office					
		Number Street					
		City State	Zip Code				
		Person's relationship to you					

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Debt	or 1	Chaina		Trotter	Case number (if known)		
		First Name	Middle Name	Last Name			
14.	Wit	nin 2 years before you file	ed for bankruptcy, did	you give any gifts or contribut	ions with a total value of	more than \$600	to any charity?
	<b>V</b>	No					
	Ħ	Yes. Fill in the details for e	ach gift or contribution.				
	_	Gifts or contributions to	-	Describe what you contrib	nuted	Date you	Value
		that total more than \$60		20000		contributed	0.000
		Charity's Name		-			
				_			
		Number Street					
		0:1-1-	7'- 0-1-	-			
		City State	Zip Code				
Part	6:	List Certain Losses					
		nin 1 year before you filed bling? No Yes. Fill in the details.	l for bankruptcy or sir	nce you filed for bankruptcy, did	d you lose anything beca	use of theft, fire,	other disaster, or
	ш	Describe the property ye	ou lost and	Describe any insurance co	overage for the loss	Date of your	Value of property
		how the loss occurred	ou lost and	Include the amount that insur pending insurance claims or	rance has paid. List	loss	lost
				A/B: Property.			
	Inclu	No	cy petition preparers, or	credit counseling agencies for ser	rvices required in your bank	ruptcy.	
	<b>▼</b>	Yes. Fill in the details.		Description and value of a transferred	ny property	Date payment or transfer was made	Amount of payment
		LAW FIRM		Attorney's Fee - 350.00		10/14/2016	\$350.00
		Person Who Was Paid		, morney or co - 500.00		10/17/2010	ψοσο.σο
		11101 S. Western Avenue					
		Number Street					
		-					
		Chicago Illinois		.			
		City State	Zip Code				
		Email or website address					
		Person Who Made the Pay	ment, if Not You				
		Person Who Was Paid					
		Number Street					
				•			
		City State	Zip Code				
		Email or website address		•			
		Person Who Made the Pay		•			

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Deb	tor 1	Chaina		Trotter	Case number (if known)	)	
		First Name	Middle Name	Last Name			
17.	help	hin 1 year before you filed by you deal with your credito not include any payment or tra  No  Yes. Fill in the details.	ors or to make payment		our behalf pay or transfer	any property to anyo	one who promised to
	ш	res. I ili ili trie details.					
				Description and value of transferred	any property		Amount of payment
		Person Who Was Paid					
		Number Street					
		City State	Zip Code				
		City State	Zip Code				
		ude both outright transfers an sfers that you have already lis No Yes. Fill in the details.		rity (such as the granting of a			On not include gifts and
				Description and value of property transferred		y property or eceived or debts paid	Date d transfer was made
		Person Who Received Trans	nsfer				
		Number Street					
		City State Person's relationship to you	Zip Code				
		Person Who Received Tran	nsfer				
		Number Street					
		City State Person's relationship to you	Zip Code				
19.		hin 10 years before you file ese are often called asset-pro		ou transfer any property to	a self-settled trust or simi	lar device of which y	ou are a beneficiary?
	<b>✓</b>	No Yes. Fill in the details.					
	Ц	ies. Fiii iii uie detalis.		Description and value of	of the property transferred	d	Date transfer was made
		Name of trust					

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Debto	or 1	Chaina First Name	Middle Name		Trotter Last Name	Ca	ase number (if known)		
Part 8	8:	List Certain Financial		ruments		t Boxes, a	and Storage Units		
20.	With mov	nin 1 year before you filed f red, or transferred? ide checking, savings, money peratives, associations, and of	or bankruptcy, wer	e any finai	ncial accounts or	instruments	s held in your name, or f	-	
	No Yes. Fill in the details.			l ant 4	divite of account	Tona	of account or	Data	Loot balance
				numbe	digits of account		of account or ument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
		Person Who Was Paid		XXXX-			Checking Savings		
		Number Street					Money market Brokerage Other		
		City State	Zip Code						
		Person Who Was Paid		XXXX-			Checking Savings		
		Number Street					Money market Brokerage		
							Other		
		City State	Zip Code						
		ou now have, or did you ha er valuables?	ave within 1 year b	efore you t	iled for bankrupt	cy, any safe	deposit box or other de	pository for secui	ities, cash, or
,	씜	No Yes. Fill in the details.							
!				Who else	e had access to it	?	Describe the conte	ents	Do you still have it?
		Name of Financial Institution	1	Name			_		☐ No ☐ Yes
		Number Street		Number	Street		_		100
				City	State	Zip Code			
		City State	Zip Code						
22.	Hav	e you stored property in a s	storage unit or plac	e other th	an your home wit	thin 1 year b	efore you filed for bank	ruptcy?	
		No Yes. Fill in the details.							
				Who else	e had access to it	?	Describe the conte	ents	Do you still have it?
		Name of Storage Facility		Name			_		☐ No ☐ Yes
		Number Street		Number	Street		_		П <sub>162</sub>
				City	State	Zip Code	_		
		City State	Zip Code						

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	Chaina	Trotter Case number (if known						
	First Name Middle Name	Last Name						
rt 9:	Identify Property You Hold or Co	ntrol for Someone Else						
	you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for neone.							
	No							
	Yes. Fill in the details.							
		Where is the property? Describe	the contents Value					
	Owner's Name	Number Street						
	Owners Name	Number Street						
	Number Street							
		City State Zip Code						
	City State Zip Code	_						
	<b>.</b>							
art 10:	Give Details About Environment	al intormation						
or the	purpose of Part 10, the following definitions ap	ply:						
- /	Environmental law means anv federal, state. o	r local statute or regulation concerning pollution, contamination, r	releases of					
	•	erial into the air, land, soil, surface water, groundwater, or other n						
i	ncluding statutes or regulations controlling the	cleanup of these substances, wastes, or material.						
- ;	Site means any location, facility, or property as	defined under any environmental law, whether you now own, oper	rate, or utilize it					
(	or used to own, operate, or utilize it, including	disposal sites.						
-	Hazardous material means anything an enviror	nmental law defines as a hazardous waste, hazardous substance,						
t	oxic substance, hazardous material, pollutant,	contaminant, or similar term.						
eport :	all notices, releases, and proceedings that you	know about, regardless of when they occurred.						
СОРОП	an riotioes, releases, and proceedings that you	Milow about, regulatess of when they occurred.						
l. Ha	s any governmental unit notified you that							
		you may be liable or potentially liable under or in violation	of an environmental law?					
-  √		you may be liable or potentially liable under or in violation	of an environmental law?					
	No	you may be liable or potentially liable under or in violation	of an environmental law?					
	No		of an environmental law?  ental law, if you know it  Date of notice					
	No		ental law, if you know it Date of					
	No		ental law, if you know it Date of					
	No Yes. Fill in the details.  Name of site	Governmental unit  Environmental unit	ental law, if you know it Date of					
	No Yes. Fill in the details.	Governmental unit Environmental	ental law, if you know it Date of					
	No Yes. Fill in the details.  Name of site	Governmental unit  Governmental unit  Number Street	ental law, if you know it Date of					
	No Yes. Fill in the details.  Name of site  Number Street	Governmental unit  Environmental unit	ental law, if you know it Date of					
	No Yes. Fill in the details.  Name of site	Governmental unit  Governmental unit  Number Street	ental law, if you know it Date of					
. Ha	No Yes. Fill in the details.  Name of site  Number Street  City State Zip Code	Governmental unit  Governmental unit  Number Street  City State Zip Code	ental law, if you know it Date of					
i. Ha	No Yes. Fill in the details.  Name of site  Number Street  City State Zip Code  ve you notified any governmental unit of a	Governmental unit  Governmental unit  Number Street  City State Zip Code	ental law, if you know it Date of					
Б. На У	No Yes. Fill in the details.  Name of site  Number Street  City State Zip Code  ve you notified any governmental unit of a	Governmental unit  Governmental unit  Number Street  City State Zip Code	ental law, if you know it Date of					
5. Ha	No Yes. Fill in the details.  Name of site  Number Street  City State Zip Code  ve you notified any governmental unit of a	Governmental unit  Governmental unit  Number Street  City State Zip Code  any release of hazardous material?	ental law, if you know it  Date of notice					
5. Ha	No Yes. Fill in the details.  Name of site  Number Street  City State Zip Code  ve you notified any governmental unit of a	Governmental unit  Governmental unit  Number Street  City State Zip Code  any release of hazardous material?	ental law, if you know it  Date of notice  ental law, if you know it  Date of					
5. Ha	No Yes. Fill in the details.  Name of site  Number Street  City State Zip Code  ve you notified any governmental unit of a	Governmental unit  Governmental unit  Number Street  City State Zip Code  any release of hazardous material?	ental law, if you know it  Date of notice					
5. Ha	No Yes. Fill in the details.  Name of site  Number Street  City State Zip Code  ve you notified any governmental unit of a	Governmental unit  Governmental unit  Number Street  City State Zip Code  any release of hazardous material?	ental law, if you know it  Date of notice  ental law, if you know it  Date of					
5. Ha	No Yes. Fill in the details.  Name of site  Number Street  City State Zip Code  ve you notified any governmental unit of a  No Yes. Fill in the details.  Name of site	Governmental unit  Governmental unit  Number Street  City State Zip Code  Inny release of hazardous material?  Governmental unit  Environmental unit	ental law, if you know it  Date of notice  ental law, if you know it  Date of					
5. Ha	No Yes. Fill in the details.  Name of site  Number Street  City State Zip Code  ve you notified any governmental unit of a  No Yes. Fill in the details.	Governmental unit  Governmental unit  Number Street  City State Zip Code  Inny release of hazardous material?  Governmental unit  Environmental	ental law, if you know it  Date of notice  ental law, if you know it  Date of					
і. На ☑	No Yes. Fill in the details.  Name of site  Number Street  City State Zip Code  ve you notified any governmental unit of a  No Yes. Fill in the details.  Name of site	Governmental unit  Governmental unit  Number Street  City State Zip Code  In y release of hazardous material?  Governmental unit  Governmental unit  Number Street	ental law, if you know it  Date of notice					
5. Ha	No Yes. Fill in the details.  Name of site  Number Street  City State Zip Code  ve you notified any governmental unit of a  No Yes. Fill in the details.  Name of site	Governmental unit  Governmental unit  Number Street  City State Zip Code  Inny release of hazardous material?  Governmental unit  Environmental unit	ental law, if you know it  Date of notice					

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Deb	tor 1	Chaina			Trotter	Case	number (if known)	
		First Name		Middle Name	Last Name			
26.	Hav	e you been a party	/ in any judici	al or administra	tive proceeding under	any environmenta	I law? Include settlements and orders	S.
	<b>✓</b>	No						
		Yes. Fill in the deta	ils.					
					Court or agency		Nature of the case	Status of the case
		Case title						_
					Court Name			Pending
				<del></del>				On appeal
		Case number			Number Street			Concluded
				•	City State	Zip Code		
Part	t 11:	Give Details A	bout Your	Business or	Connections to An	y Business		
27.	With	nin 4 years before	you filed for I	oankruptcy, did	you own a business or	have any of the fo	llowing connections to any business	?
		A sole propriet	tor or self-emp	oyed in a trade, p	orofession, or other activit	y, either full-time or	part-time	
					or limited liability partners		F-11.	
		A partner in a	-	oompany (LLO)	or inflitted liability partition	oriip (EEI )		
				ing executive of	a corneration			
			_	-		<b></b>		
		An owner or at	least 5% of th	e voting or equity	securities of a corporatio	n		
	<b>✓</b>	No. None of the abo	ove applies. Go	to Part 12.				
		Yes. Check all that	apply above ar	nd fill in the details	s below for each business			
					Describe the natu	re of the business	Employer Identification n	umber Do not
							include Social Security nu	
					_		EIN:	
		Business Name						
		Number Ctreet			_		Dates business existed	
		Number Street			Name of accounta	ant or bookkeeper		
		City	State	Zip Code			From To	
					Describe the natu	re of the business	Employer Identification n include Social Security nu	
								imber of friiv.
		Business Name			_		EIN:	
		Number Street			_		Dates business existed	
		Number Street			Name of accounta	ant or bookkeeper	,	
		City	State	Zip Code			From To	
					Describe the natu	re of the business	Employer Identification n include Social Security nu	
		D			_		EIN:	
		Business Name						
		Number Street			_		Dates business existed	
					Name of account	ant or bookkeeper		
		City	State	Zip Code			From To	

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Deb	tor 1	Chaina			Trotter	Case number (if known)
		First Name		Middle Name	Last Name	
28.		nin 2 years befo litors, or other		r bankruptcy, did yo	ou give a financial stateme	nt to anyone about your business? Include all financial institutions,
		No Yes. Fill in the d	etails below.			
					Date issued	
		Name			MM/DD/YYYY	
		Number Stre	eet		_	
		City	State	Zip Code	<u> </u>	
Part	t 12:	Sign Below	ı			
	true a	and correct. I u	nderstand that	making a false sta	tement, concealing proper	ents, and I declare under penalty of perjury that the answers are ty, or obtaining money or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
		×	/s/ Chaina Troti	or and a second		×
		Sig	nature of Debto			Signature of Debtor 2
		Da	te 10/19/2016			Date
	Did y	ou attach addi	tional pages to	Your Statement of	Financial Affairs for Indiv	iduals Filing for Bankruptcy (Official Form 107)?
	<b>✓</b> N	lo				
		'es				
	Did y	ou pay or agre	e to pay some	one who is not an at	ttorney to help you fill out I	pankruptcy forms?
	<b>✓</b> N	lo				
	<u> </u>	es. Name of pe	rson			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

#### **Chapter 7: Liquidation**

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes:
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft:
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

+		administrative fee
+		administrative fee
	\$200	filing fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total foo

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

### Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

### RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.



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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

### C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.



#### D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

  Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services.

  However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

#### E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

#### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00 For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$371.76

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- 3. Before signing this agreement, the attorney has received, \$350.00 toward the flat fee, leaving a balance due of \$3,650.00; and \$61.76 for expenses, leaving a balance due of \$4,021.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: 10/14/2016

Signed:

/s/ Chaina Trotter

( Monn

Debtor(s)

/s/ Mark Bernachea

Attorney for Debtor(s)

Do not sign if the fee amounts at top of this page are blank.

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B 203 (12/94)

#### **UNITED STATES BANKRUPTCY COURT**

#### **Northern District of Illinois**

		Northern Distric					
n re -	Chaina Trotter  Debtor		Case No.	(If known)			
	Deptol		Chapter	Chapter 13			
			· -	•			
	DISCLOSURE OF	- COMPENSATION	N OF ATTORNEY FO	OR DEBTOR			
1.	Pursuant to 11 U.S.C. § 329(a) a that compensation paid to me wi services rendered or to be rende is as follows:	thin one year before the filing	of the petition in bankruptcy, or	agreed to be paid to me, for			
	For legal services, I have agreed	\$4,000.0					
	Prior to the filing of this stateme	nt I have received		\$350.0			
	Balance Due			\$3,650.0			
2.	The source of the compensation	paid to me was:					
	<b>D</b> ebtor	Other (specify	<b>(</b> )				
3.	The source of the compensation	paid to me is:					
	<b>✓</b> Debtor	Other (specify	<b>'</b> )				
4.	I have not agreed to share the members and associates of		ation with any other person unles	s they are			
		ny law firm. A copy of the agre	with a other person or persons veement, together with a list of the				
5.	In return for the above-disclosed a. Analysis of the debtor's fire bankruptcy;	_	legal service for all aspects of the debtor in determing				
	b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;						
	c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof						
	d. Representation of the deb	otor in adversary proceedings	and other contested bankruptcy	matters;			
6.	By agreement with the debtor(s),	the above-disclosed fee doe	s not include the following servic	es:			
		CERTIFICA	ATION				
	I certify that the foregoing is a corne debtor(s) in this bankruptcy pro		ement or arrangement for payme	ent to me for representation			
	10/19/2016		/s/ Mark Bernachea				
	Date		Signature of Attorney				
			Semrad Law Firm				
			Name of law firm				

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#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

In re:	Trotter, Chaina	Case No			
_	Debtor(s)				
		Chapter.	Chapter13		
	VERIFICATION OF CREDITOR MATRIX				
	The above named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge.				
Date:	10/19/2016	/s/ Trotter, Chaina			
	16,16,2516	Trotter, Chaina	_		
		Signature of Debtor			

Exeter Finance Corp P.O. Boxn 201347 Arlington, TX 76006

US DEPT OF ED/GLELSI P.O. Box 69184 c/o Taurus Al-Raheem Atlanta , GA 30353

FRANKLIN COLLECTION SV 2978 W Jackson St Tupelo , MS 38801

GRAND CANYON UNIVERSIT 3300 W CAMELBACK RD PHOENIX , AZ 85017

MIDSTATE COLLECTION SO 2009B Round Barn Rd Champaign , IL 61821

ARS 1801 NW 66TH AVE SUITE 200 FORT LAUDERDAL, FL 33313

ARS 1801 NW 66TH AVE SUITE 200 FORT LAUDERDAL , FL 33313

ARS 1801 NW 66TH AVE SUITE 200 FORT LAUDERDAL , FL 33313

COMMONWEALTH FINANCIAL 245 Main St Scranton , PA 18519

ARS 1801 NW 66TH AVE SUITE 200 FORT LAUDERDAL , FL 33313

ARS 1801 NW 66TH AVE SUITE 200 FORT LAUDERDAL , FL 33313

ENHANCED RECOVERY CO L 8014 BAYBERRY RD Case 16-33411 Doc 1 Filed 10/19/16 Entered 10/19/16 18:35:25 Desc Main Document Page 66 of 73

JACKSONVILLE, FL 32256

ESCALLATE 5200 STONEHAM ROAD SUITE 200 NORTH CANTON , OH 44720

ESCALLATE 5200 STONEHAM ROAD SUITE 200 NORTH CANTON , OH 44720

ESCALLATE 5200 STONEHAM ROAD SUITE 200 NORTH CANTON , OH 44720

ARS 1801 NW 66TH AVE SUITE 200 FORT LAUDERDAL , FL 33313

Illinois Tollway PO Box 5544 Chicago , IL 60680

Village of Matteson 4900 Village Commons Matteson , IL 60443

City of Country Club Hills PO Box 7690 Carol Stream , IL 60197

Village of Hazelcrest 3000 W. 170th Place Hazel Crest, IL 60429

Speedy Cash Po Box 101928 Birmingham , AL 35210

City of Chicago Heights 39773 Treasury Center Chicago , IL 60694

Village of Homewood 2020 Chestnut Road Homewood, IL 60430

Village of South Holland 16226 Wausau Avenue South Holland, IL 60473 Case 16-33411 Doc 1 Filed 10/19/16 Entered 10/19/16 18:35:25 Desc Main Document Page 68 of 73

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Debtor 1 Chaina First Name	Middle Name	Trotter Last Name	Case number (if known)	
	estions for Reporting Purpose			
16. What kind of debts do you have?	16a. Are your debts primarile "incurred by an individua No. Go to line 16b. ✓ Yes. Go to line 17.  16b. Are your debts primarile	y consumer debts? Con. al primarily for a personal, y business debts? Busina investment or through th	sumer debts are defined in 11 U.S.C. § anily, or household purpose."  ess debts are debts that you incurred to be operation of the business or investmental debts or business debts.	obtain
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid that  No.	er 7. Do you estimate that aft	ter any exempt property is excluded and ad stribute to unsecured creditors?	Iministrative
18. How many creditors do you estimate that you owe?	☑ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	Record	
19. How much do you estimate your assets to be worth?		\$1,000,001-\$ \$10,000,001-\$ \$50,000,001-\$ \$100,000,001	\$50 million	-\$10 billion 1-\$50 billion
<sup>20</sup> · How much do you estimate your liabilities to be?		\$1,000,001-\$- \$10,000,001-\$ \$50,000,001-\$ \$100,000,001	\$50 million	-\$10 billion 1-\$50 billion
Part 7: Sign Below				
For you	correct.  If I have chosen to file under Cl of title 11, United States Code. under Chapter 7.  If no attorney represents me an out this document, I have obtain I request relief in accordance will understand making a false state.	hapter 7, I am aware that I I understand the relief av d I did not pay or agree to ned and read the notice re ith the chapter of title 11, tement, concealing proper case can result in fines up	United States Code, specified in this perty, or obtaining money or property by for to \$250,000, or imprisonment for up to	7, 11,12, or 13 e to proceed o help me fill etition.
	Executed on10/14/2016 MM / DD		Signature of Debtor 2  Executed on	-

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Fill in this info	mation to identify your	case:		
Debtor 1	Chaina		Trotter	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	_
United States	Bankruptcy Court for the:		District of Illinois	
Office States i	baskruptcy Court for tile.	Notatem	(State)	<del></del>
Case number (If known)				_
Official	Form 106De	ec		Check if this is an amended filing
Declarat	ion About an	Individual Deb	tor's Schedules	12/15
f two married	people are filing togeth	er, both are equally respo	nsible for supplying correct	information.
Part 1: Sign  Did you p		eone who is NOT an attorr	ney to help you fill out bank	ruptcy forms?
Yes.	Name of person		Attach Bankruptcy Po Signature (Official Fo	etition Preparer's Notice, Declaration, and rm 119).
that they	are true and correct.		nmary and schedules filed v	vith this declaration and
Signature of	of Debtor 1	Oth	Signature	of Debtor 2
Date 10/1	4/2016 /DD/YYYY		Date MM	(ADD/YYYY

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Debtor 1			Trotter	Case number (if known)
	First Name	Middle Name	Last Name	TO A THE HEAD PROPERTY OF THE STATE OF THE S
	thin 2 years before y editors, or other part		ou give a financial state	ment to anyone about your business? Include all financial institutions
<u> </u>	No Yes. Fill in the deta	ils below.		
			Date issued	
	Name		MM/DD/YYYY	_
			_	
	Number Street		_	
	City	State Zip Code	_	
	_	,		
Part 12:	Sign Below			
	nkruptcy case can re <b>✓</b>			perty, or obtaining money or property by fraud in connection with to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
		e of Debtor 1		Signature of Debtor 2
	Date 10/	/14/2016		Date
Did y	you attach additional	I pages to Your Statement of	Financial Affairs for Indi	viduals Filing for Bankruptcy (Official Form 107)?
V	No			
	Yes			
Did y	ou pay or agree to p	ay someone who is not an at	torney to help you fill ou	t bankruptcy forms?
<b>7</b>	No			
	Yes. Name of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

In re:	Trotter, Chaina  Debtor(s)	Case No	. Case No		
		Chapter.	Chapter13		
	VERIF	ICATION OF CREDITOR MAT	RIX		
Ti knowledge		rify that the attached list of creditors is tr	ue and correct to the best of their		
Date:	10/14/2016	/s/ Trotter, Chain Trotter, Chaina Signature of Deb	Contract S 0400		

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Debto	r 1 Chaina		Trotter	Case number (if known)			
	First Name	Middle Name	Last Name				
16.	alculate the median family income that applies to you. Follow these steps:						
	16a. Fill in the state in w	hich you live.	Illinois	_			
10	16b. Fill in the number of people in your household.		2	_			
	16c. Fill in the median fa	mily income for your state and s	ize of	_	\$63,896.00		
	household using the link speci	fied in the separate instructions f		nd a list of applicable median income amounts, go online may also be available at the bankruptcy clerk's office.			
17.	low do the lines compare?						
	17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable Income (Official Form 122C-2).						
	U.S.C. § 1325		Calculation of Dispo	neck box 2, Disposable income is determined under 11 pasable Income (Official Form 122C-2). On line 39 of that			
Part 3	: Calculate Your C	ommitment Period Under	11 U.S.C. §1325(	b)(4)			
18.	Copy your total average	e monthly income from line 11	<b>.</b>		\$2,153.50		
	Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.						
	19a. If the marital adjustr	ment does not apply, fill in 0 on l	line 19a.		-\$0.00		
	19b. Subtract line 19a	from line 18.			\$2,153.50		
20.	Calculate your current	monthly income for the year.	Follow these steps:				
	20a. Copy line 19b.				\$2,153.50		
	Multiply by 12 (the	number of months in a year).			x 12		
	20b. The result is your cu	urrent monthly income for the ye	ar for this part of the t	form.	\$25,842.00		
	20c. Copy the median fa	mily income for your state and s	ize of household from	a line 16c.	\$63,896.00		
21.	How do the lines comp	are?					
		line 20c. Unless otherwise orders 3 years. Go to Part 4.	red by the court, on t	he top of page 1 of this form, check box 3, The			
	Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, <i>The commitment period is 5 years</i> . Go to Part 4.						
Part 4	Sign Below						
					A		
	By signing here, I de	clare under penalty of perjury tha	at the information on t	his statement and in any attachments is true and correct.			
	🗶 /s/ Chaina Tro	otter Chausa Anto	<b>.</b>	•			
	Signature of Deb			Signature of Debtor 2			
	Date 10/14/20 MM/DD/Y			Date MM/DD/YYYY			
	If you checked 17a, do NOT fill out or file Form 122C-2. If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.						